



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re application of: Ned HOFFMAN Conf. No. 3861
Serial No. 09/441,107 Examiner: FISCHETTI, Joseph A.
Filed: November 16, 1999 Art Unit: 3627
For: SYSTEM AND METHOD FOR TOKENLESS BIOMETRIC ELECTRONIC SCRIP

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

This Information Disclosure Statement is submitted:

under 37 CFR 1.97 (b); or
(Within three months of filing national application; or date of entry of International application; or before mailing date of first office action on the merits; or before the mailing of a first Office Action after the filing of a request for continued examination under §1.114; whichever occurs last)

under 37 CFR 1.97 (c) together with either a:
 Statement under 37 CFR 1.97 (e), or
 a \$180 fee under 37 CFR 1.17 (p); or

(After mailing of first Office Action, but prior to Notice of Allowance or Final Office Action)

under 37 CFR 1.97 (d) together with:
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(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

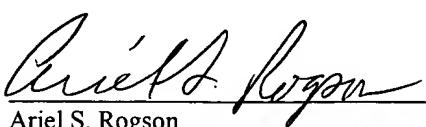
Applicant(s) submit herewith Form PTO 1449- Information Disclosure Citation together with copies of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

It is requested that the information disclosed herein be made of record in this application.

Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.

Customer No. 60460

Respectfully submitted,
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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:
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Christina Lawton

PATENT APPLICATION

In re application of: Ned HOFFMAN Conf. No. 3861
Serial No. 09/441,107 Examiner: FISCHETTI, Joseph A.
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**INFORMATION DISCLOSURE CITATION
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Examiner: _____

Date Considered: _____